

Council News

1998 Administrative Supplement

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COUNCIL News Online—Information at Your Fingertips

Each winter, we publish a supplement to *Council News*, but this one is different. We are devoting much of this issue to the *Council News* Web site to encourage our readers to tap into this key information resource.

As an NIAID-funded (or would be) investigator, you can use the *Council News* Extramural Information Center http://www.niaid.nih.gov/ncn/main.htm to your advantage: to help find funding for your research, learn where future monies are targeted, and identify whom to call for different topics.

This newsletter issue will show how our Web site can help you. It has a proven track record: the two-year-old Extramural Information Center has become one of the most popular sites on the NIAID home page.

The Web site serves several purposes for the research community.

First, it gives you the means to strategically gather information that can help you obtain research funding.

Second, investigators who visit the site regularly gain easy access to newsworthy information: our latest initiatives, revealing where future dollars are headed, and news and policy updates featured in the regular Council issues of this newsletter. These editions of *Council News* appear online about a month after Council meets (in May or June, September or October, and January or February), followed by the printed version several weeks later.

Our former supplement, a complete listing of NIAID's programs and staff contacts for each program area, is now online at http://www.niaid.nih.gov/ncn/newsup.pdf>.

Third, our Toolbox provides basic information on NIH and NIAID, including a glossary of confusing NIH terms, advice on writing a grant application, grant mechanisms supported by the Institute, and questions and answers about

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you

training grants, to name a few (see the article on page 5 for more information).

Let the Web guide your way: the Worldwide Web is a virtual knowledge bardlergy athelp



seeking

a grant.

grant, use a strategy. You can improve your chances of getting a grant by following some basic principles and planning strategically. For example:

- Meld your expertise with the scientific needs of funding agencies to make your application more fundable.
- Consider writing an application that addresses the highpriority areas advertised by agencies such as NIAID.
- Avoid overcrowded fields.

 Use the Web to see how many grants there are in a given field.

 Find the gaps and go for them.
- Get as much help as you can in preparing the application and feedback after it is written.

After you visit the *Council News* Web site, let us know how you like it and what additional features you would like to see.

A link to the feedback form is at the bottom of every page, or go directly to http://www.niaid.nih.gov/ncn/feedfrm.htm.

A Five-Step Approach to Finding NIAID's High-Priority Topics

1. Review concepts approved by Council after each Co vcil meeting.

Concepts represent the very earliest stage of the xelvel of the property of th

To see a list of recent concepts and more detailed descriptions of concepts by Division, go to the *Initiatives* and *Concepts* section of the *Council News* Web site at http://www.niaid.nih.gov/ncn/in-main.htm.

2. Check the table of published program announcements to see advertised areas in which we need applications.

PAs published after May 1996 and some older PAs come with a commitment that NIAID will fund grants in the targeted area, including some with percentiles beyond the payline.

We list these PAs in *Initiatives and Concepts*, or go directly to http://www.niaid.nih.gov/ncn/pa-

Note: our PA table is a more reliable information source than the NIH Guide for Grants and Contracts, which contains some PAs no longer active (see article on page 11 for more information).

3. Look at the list of current RFAs.

Go to the RFA list in *Initia-tives and Concepts* or directly to http://www.niaid.nih.gov/ncn/rfa-new.htm.

4. Search NIAID's grant portfolio through the Community of Science or CRISP databases.

Ferret out the gaps in your field. Also, see what other institutes have funded.

Avoid sending in an application in an area overpopulated with researchers.

Both the Community of Science and CRISP have search engines that will list funded research projects. Links to both are in the *Programs and Staff* section of the Web site at http://www.niaid.nih.gov/ncn/st-main.htm.

5. For more information and advice, call an NIAID program administrator.

HOW NIAID'S INITIATIVES CAN GUIDE YOU TOWARD FUNDING

Targeting a research application to an area of high scientific interest to NIAID or another NIH institute can boost your chances of getting a grant.

Though an average of 25 percent of NIH applications are funded, success rates vary for different grant types (for example, small business innovation research—SBIR) and also for applications addressing hot scientific topics.

This happens for the latter because institutes are more likely to fund a grant with a percentile somewhat beyond the payline if the topic is an area of need.

Identifying these areas is easy. Like other institutes, NIAID advertises its priority topics in the NIH Guide, http://www.nih.gov/grants/guide/index.html, as a program announcement or, less often, a request for applications

(or a request for proposals if a contract is sought).

Applications on topics developed by applicants (investigator-initiated) are usually paid in strict percentile order, right down the list, stopping at the Institute's payline (percentile-based funding cutoff point at which we expect monies to be used up).

But applications responding to an initiative may gain an award even though their percentiles are beyond the payline cutoff. Thus, by applying under an initiative, you can beat the NIH success rate of one out of four.

Each week, the *Guide* publishes lists of initiatives, which we

immediately place on the *Council News* Web site, with a direct link to the full text (RFPs link to our contracts site).

Two advantages to using our PA list are that you can rapidly scan all NIAID PAs in one listing, and we have

By applying under an initiative, you can beat the NIH success rate of one out of four.

culled obsolete PAs still listed on the NIH site. Initiatives have their own section on our Web site at http://www.niaid.nih.gov/ncn/in-main.htm.

Sign up with FIE

It's important to keep up with funding opportunities not only at NIAID but for the entire federal government. When you sign up with Federal Information Exchange, information on government grants and contracts comes straight to your e-mail inbox.

Find the dual system
FEDIX/MOLIS (Federal Information Exchange and
Minority Online Information
System) at http://web.fie.com>.

FEDIX lists opportunities sponsored by the U.S. government, including research grants.

You can search for opportunities by agency, topic, or audience and register for a free e-mail service that

delivers information about research and educational resources in your areas of choice.

To set this up, go to FEDIX Opportunity Alert to create your own basket of topics that you would like to hear about. Choose from dozens of subjects in biomedical, behavioral, and other research topics.

MOLIS highlights historically black and Hispanic-serving

colleges and universities. It provides information on faculty, students, and programs and also gives you opportunities, including fellowships, scholarships, and conferences.

In addition to research grants, FIE houses information on federal jobs, contracts, equipment, and educational services as well as procurement notices and minority resources.

USING CONCEPTS TO YOUR ADVANTAGE

What are concepts, and how can knowledge of them benefit you? A concept embodies the planning stages of an initiative—PA, RFA, or RFP. Though all concepts do not end up as published initiatives, we publish our concepts on the Web because they reveal high-priority research areas and topics in which NIAID would like to receive applications.

Concepts give you a heads-up on potential future initiatives.

Concepts give you insight into potential future initiatives.
Applications in these high-priority areas often qualify for special, above-the-payline funding.

Savvy investigators will look closely to see whether their expertise lends itself to any of these research topics.

Don't wait for NIAID to publish a program announcement.

Applications in high-priority areas featured in concepts and initiatives may qualify for special, above-the-payline funding.

How concepts are developed

Concepts for future initiatives are the fruits of many meetings and focus groups with the extramural community.

These information exchanges blend ideas of the community with those of NIAID staff into a solid understanding of future scientific needs and directions. These ideas are then discussed at NIAID's biannual planning meetings where Institute managers view the big picture and decide which concepts to send to Council for review.

We then turn to our advisory Council for further guidance. According to law, before we can announce an initiative, its rationale must be approved by experts in the field, usually Council.

In this way, Council acts as a "board of directors," exerting approval authority for moving a concept to a published initiative.

Council shapes concepts

Council's lay and scientific members also help determine an initiative's characteristics, such as budget levels, mechanism (e.g., grant or contract, grant type), and other key features.

At the subcommittee meetings that take place during Council, program staff present an outline of a proposed concept for Council's scrutiny.

(NIAID has three Council subcommittees, one for each of its extramural program divisions.)

For each concept, the subcommittee looks deeply at its scientific merit, relative priority,

appropriate budget, and funding mechanism.

Council's regular and *ad hoc* members approve, disapprove, or suggest modifications to each concept.

After fine-tuning by Council and the research community, Council-approved concepts become published PAs, RFAs, or RFPs depending on their Institute-wide priority and the amount of funds available for the fiscal year.

Finding PAs Online

To find NIAID's active PAs, use the listing in Council News Web site at http://www.niaid.nih.gov/ncn/patable.htm>.

Though the NIH Guide
for Grants
and Contracts also
publishes PAs on the
Web, that site houses
some outdated PAs
NIAID no longer
considers for special
funding.

EXTRAMURAL INFORMATION CENTER— YOUR VIRTUAL INFORMATION REPOSITORY

NIAID created the *Council News* Extramural Information Center as a onestop shop for our extramural investigators, housing news, policy information, initiatives, and general NIH items in one convenient place.

We hope you are using this site, with the policy notices in the NIH Guide for Grants and Contracts, to keep abreast of the latest information.

In the Center, you will find:

- News and feature newsletter articles.
- Information on NIAID programs, staff, and Council.

Two Ways to Find the *Council News* Extramural Information Center

Go to the Center's URL-

http://www.niaid.nih.gov/ncn/main.htm

Or from *Information* on the NIAID home page http://www.niaid.nih.gov, click on

Council News Extramural Information

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- Tools with "how to" and reference information.
- Links to more than 30 outside sites.

Getting started

If you are new to the Information Center, start by visiting *What's Inside*.

It lets you know what you will find in each major subsite: *Newsletter, Initiatives, Programs and Staff, Council, Link Lists,* and *Toolbox.* It also has an index and a link to NIAID's search engine.

Just news

Capturing all our newsletter articles and features, the *Newsletter* section delivers the news about a month faster than our printed newsletter does (and some information may appear only on the Web).

For the past year, we have presented the newsletter in Acrobat format. Because some readers find Acrobat slow, we are also providing a plain text version for new issues. Three years of back issues will be uploaded around the time this newsletter is published.

Initiatives, programs, and more

Look under *Initiatives* to learn where future dollars are going. Begin with a list of **concepts cleared at last Council** for a preview of possible funding trends. Concepts may become future initiatives (PAs, RFAs, or RFPs).

Our most popular document is the table of published **program announcements** individually linked to the full announcement in the *NIH Guide* for Grants and Contracts.

Initiatives also has links to current requests for applications and requests for proposals; it is updated several times each week.

The *Programs and Staff* section lets you know where in NIAID different scientific areas are administered and helps you determine whom to call. Our **program and staff listing** on the Web at http://www.niaid.nih.gov/ncn/newsup.pdf lists organisms, diseases, and research areas by organization with links to the staff member who administers each scientific program. It also lists the functions of the administrative Division of Extramural Activities and its staff.

Programs and Staff also has outside links that let you search NIH databases for current awards, NIH

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program descriptions, and other topics.

There are also links and information on **Training** and **Minority programs**.

Under *About Council* you can see **What Council does** and **Biographical sketches of Council members** and link to **Minutes of Council meetings.**

Our *Toolbox* site has been growing steadily with the addi-

tion of more general and reference information. The latest addition, *How to Write a Research Grant Application*, gives you inside perspectives and tips from reviewers and NIH review staff to help you approach writing a grant and avoid common pitfalls.

Another useful item in *Toolbox* is our list of **NIAID** paylines. Also, check out our **Glossary of confusing NIH terms, Abbreviation list,** and other reference

items, such as a list of NIAIDsupported repositories, Award mechanisms supported by NIAID, and a link to rosters of Study sections of the Center for Scientific Research.

Link Lists has lists of relevant Internet sites organized by topic: AIDS, emerging infectious diseases, virology, government, journals and news, and others as well as major internal links for the Council News Web site.

WHAT NIAID'S GRANTS, CONTRACTS, REVIEW, AND PROGRAM STAFF CAN DO FOR YOU

How do you know whom to contact for help with a problem or to get information, such as insights into reviewers' comments about your application at the initial review meeting?

Providing information to the extramural community is an important job for many NIAID staff.

Your program officer is your primary liaison with NIAID. Overseeing scientific portfolios, program staff work in the Division of AIDS; Division of Allergy, Immunology, and Transplantation; and Division of Microbiology and Infectious Diseases.

On the business side, the Division of Extramural Activities (DEA) employs grants and contract specialists and scientific review administrators, who have special expertise available to you.

Grants specialists take care of grants business

Grants specialists can provide business-type information, such as what costs are allowable and how to present the budget in an application. Their job is to administer your grant's budget and make sure policy and reporting requirements are met.

Call them to find about new requirements and to learn which actions—for example, rebudgeting or no cost extensions—need approval and by whom.

Your grants management specialist is listed in the terms of acceptance section of your Notice of Grant Award, or call 301/496-7075.

Contract specialists manage contracts

Like their counterparts in grants, contract specialists can help you with many technical, business, and cost-related questions.

They can advise you about changes in the scope of the research, the allowability of specific costs, procedures for obtaining approval for travel or equipment, and preparing a successful proposal. Main phone number is 301/496-0612.

SRAs are in-house peer review experts

Also working in DEA, NIAID's scientific review administrators (SRA) have a wealth of knowledge about peer review.

They can advise you on grant and proposal preparation and provide insights into the peer review process, including what reviewers look for in an application, application format, and documentation.

SRAs can also answer questions related to a specific review, such as Can an applicant submit additional data to clarify the approach after the application deadline has passed?

data to clarify the approach after the application deadline has passed?

As in other institutes, NIAID reviews program projects, cooperative agreements, training (T) and research career (K) applications, and those responding to RFAs and RFPs. (The Center for Scientific

The main number for NIAID's Scientific Review Program is 301/496-2550.

Review reviews R01, small business innovation

research, and fellowship applications.)

You can also call DEA for general information on the budget, award types, funding policies, and other administrative questions. The main phone number is 301/496-7291. Mr. Allan Czarra (301/496-3772) can answer nonscientific questions about small business (SBIR and STTR) awards.

Program staff—your primary NIAID connection

Assisting extramural researchers throughout the life of an award, program officers are your primary sources of information on scientific and general Institute and NIH policy matters.

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SRAs can answer questions about a specific review. Call your program officer to find out the competitiveness of your application relative to NIAID's payline and priorities (especially important when responding to program announcements).

Because they often attend review meetings as observers, program officers may be able to clue you in on comments made at the initial review meeting about your application. With only the summary statement critique to go on, applicants are sometimes not sure whether their application is worth revising and resubmitting.

Feedback on the discussion helps you decide what to do next.

Program staff can also help you explore new scientific directions. And they provide liaison for resolving scientific issues with grants management staff.

Deciding Whom to Call? Think Type and Stage of Application

When determining whom to call at NIAID, first consider the kind of application (e.g., investigator-initiated R01, training grant, response to a program announcement) and then the stage, from application to award.

Investigator-initiated research is the biggest part of NIAID's research portfolio. Call the program officer for the relevant area of research for programmatic, scientific, and general policy questions.

Answers to many questions are on the Web. Before you begin writing an application, carefully read the PHS 398 grant application, online at http://www.nih.gov/grants/funding/phs398/phs398.html.

Initiatives

When responding to an NIAID initiative, read the announcement carefully, and call the program staff person if you need more information.

The program officer responsible for a PA, RFA, or RFP will be listed in the *Guide* announcement.

Training-type grants

NIAID's Office of Science Training handles all types of training awards: fellowships, training grants, and career development awards. Heading that office is Dr. Milton Hernandez, 301/496-3775.

For scientific questions related to training grants, call the relevant program officer.

And go to the **Toolbox** in our Web site for basic information and questions and answers on training grants.

What stage does the question address?

In deciding whom to call, think whether the question applies to the period before you send in an application, while applying and during review, or after a grant or contract is funded.

Before you write an application, staff
in a program can answer your questions
about program needs and give you basic
budgetary information, such as Institute
paylines.

Call an SRA for general review guidance and Mr. Czarra or Ms. JoAnn Stesney (301/496-7131) for administrative questions.

- After you send NIH your application,
 the SRA in charge of the review can
 answer questions related to the review,
 such as whether you can send NIAID
 supplemental information after the closing
 date.
- For insights into the discussion of your application at the review meeting, contact your program officer, who can give you advice on what to do if you got an almost fundable score.
- After you get a grant or contract, call your program officer for scientific issues, and your grant or contract specialist for regulations, policies, and administrative requirements.

THREE-YEAR PAS, SOME PAS CANCELED

To see the latest PAs, it's best to look in the *Council News* Extramural Information Center on the Web. If you use the *Guide* as your information source, you run the risk of viewing outdated PAs.

When NIAID shifted its emphasis to PAs two years ago, the Institute canceled many of its older PAs.

These will *not* qualify for special funding consideration. Further, most PAs published after September 6, 1996, will expire three years from publication.

These changes were announced in the NIH Guide for Grants and Contracts together with a list of inactivated PAs (at right).

For more information on NIAID's PAs, see the notices in the *Guide* issues June 7, 1996, and November 1, 1996.

WE CAN HELP PUBLICIZE YOUR RESEARCH

About to publish or announce new research findings funded by NIAID? Let the NIAID Office of Communications (OC) help get out the news.

OC works with NIAID's program officers, investigators, and communications staff at your institution to highlight important results of NIAID-funded studies.

This function fulfills a congressional requirement to inform the public about how NIH is working to improve public health.

For us to help you most effectively, call OC *before* publication.

We need to know in advance about newsworthy publications and presentations.

Many reporters receive advance copies of journals such as *Science*, *Nature*, and *The New England Journal of Medicine* and begin working on stories several days ahead of publication.

If you let us know when your paper is accepted, we will have

time to work with you and your institution to coordinate press coverage.

We honor any embargoes on journal articles and get your approval of press statements before release.

Depending on the research finding, we may suggest a press release or even a press conference, video news release, or video b-roll (images accessible via satellite).

OC staff have excellent relationships with top science reporters and are often called for comment about science stories.

Knowing news in advance helps us fill in reporters. For more information, call OC director Patricia Randall at 301/496-5717 or send e-mail to pr16n@nih.gov.

PAs No Longer Active

All PAs published before November 6, 1992

PA-93-014, The Immunology of Aging, November 6, 1992

PA-93-034, Mucosal Immunity in the Urogenital Tract, January 8, 1993

PA-93-037, Asthma as a T-Cell-Mediated Disease, January 15, 1993

PA-93-042, Cytokines and Adhesion in Allergy and Inflammation, January 22, 1993

PA-93-049, Neurological Aspects of Lyme Disease, February 6, 1993

PA-93-061, Congenital Cytomegalovirus: Study of Infection and Sequelae, March 5, 1993

PA-93-085, Biological Factors Influencing Sexual Transmission of HIV, May 21, 1993

PA-93-090, Basic Rubella Research Leading to Improved Rubella Vaccines, June 4, 1993

PA-93-096, Research on DNA Vaccines for Infectious Diseases, June 18, 1993

PA-93-105, Helicobacter pylori Pathogenesis, August 8, 1993

PA-93-114, Autoimmune Endocrine Disease, September 24, 1993

PA-94-023, HIV-Related Therapeutics in Drug Users, January 7, 1994

PA-94-049, Studies on Environmental Toxicants and the Immune System, March 18, 1994

NIAID'S COUNCIL—OUR CHIEF ADVISORY COMMITTEE

The National Advisory Allergy and Infectious Diseases Council embodies a diverse perspective on science, health, and the human impact of disease.

Its 18 voting members include 12 health or science experts and six lay members.

Six nonvoting, ex officio members provide liaison with higher level agencies or organizations having missions congruent with that of NIAID.

NIAID's Council plays four roles: performing second-level peer review, advising on policy, reviewing programs, and conducting concept clearance for PAs, RFAs, and RFPs.

They are the secretary, DHHS; Director, NIH; director, NIAID; chief medical director, Department of Veterans Affairs; assistant secretary of defense for health affairs; and director, National Center for Infectious Diseases, Centers for Disease Control and Prevention. Members usually serve for four years.

Council's scientists contribute technical expertise and an understanding of the needs of the research communities of academia and industry.

To supplement this knowledge in specialized fields, NIAID also

invites *ad hoc* members. And lay Council members impart a perspective of people affected by diseases under NIAID support.

Each Council member also belongs to one of the three Council subcommittees—AIDS, Microbiology and Infectious Diseases, and Allergy, Immunology, and Transplantation, corresponding to NIAID's extramural divisions.

Council breaks up into separate subcommittee meetings to do much of its work. Discussions of specific research areas often take place in the subcommittees.

What Council does

As required by law, chartered advisory committees, including the councils, are part of every NIH institute.

NIAID's Council plays four key roles: performing second-level review, advising us on policy, reviewing programs, and developing and clearing concepts for PAs, RFAs, and RFPs.

Policy is usually discussed by the full Council. NIAID often seeks Council's advice before changing policies for training, health information dissemination, administration, budget, and other areas.

The Council-related issues of NIAID *Council News* highlight many of these discussions.

The subcommittees conduct most other business. During program reviews, the subcommittees counsel us on a program's effectiveness in meeting Institute goals and the needs of the scientific fields it supports.

Second-level peer review

The second level of peer review is a core charge of Council.

A new electronic system pioneered by NIAID lets members approve applications with percentiles within the payline and having no special concerns several weeks before Council meets.

A database holds the summary statements, which are reviewed by a special Council subcommittee; hard copies of summary statements are also available to all Council members.

Applications with concerns are reviewed by Council subcommittees in a closed session.

What happens at Council meetings

Council meets in September or October, January or February, and May or June.

Its activities are driven partly by the budget and appropriation cycle. For example, discussions in September reflect the beginning of the fiscal year.

During the first morning, the subcommittees meet individually to review applications needing special consideration, discuss selective pay nominations, and vote on MERIT awards.

In the afternoon, Dr. Fauci convenes the full Council. He presents scientific and administrative topics for discussion, often including staff and outside speakers.

The session is followed by a short, closed meeting of the full Council to discuss and formally approve subcommittee recommendations for funding grants.

The second day is devoted to the subcommittee meetings, focusing on scientific and programmatic topics relevant to the divisions.

The Division of AIDS has a unique structure in that its subcommittee meets in conjunction with another congressionally mandated body, the AIDS Research Advisory Committee.

Concept clearance

As we stated before, NIAID now seeks Council's advice for long-term planning at a much earlier stage than we did previously. With this new approach, Council members and *ad hoc* advisors counsel the Institute on broad research priorities and directions, giving a better reflection of the interests of the outside community.

Then, after a decision is made to go forward with an initiative, the Council subcommittee reviews it again for budget and mechanism (e.g., grant or contract, and grant type).

Council minutes are on the Worldwide Web at http://www.niaid.nih.gov/facts/minutes/minutes.htm>.

NIAID COUNCIL MEMBERS

Four new members joined Council in 1998. NIAID welcomes new members Drs. Jorge L. Benach, Janis V. Giorgi, Thomas J. Lawley, and Emil R. Unanue and new *ex officio* members Drs. Lawrence Deyton and Theodore M. Freeman.

Jorge L. Benach, Ph.D., is professor of pathology, State University of New York, Stony Brook, and a member of the Tick Borne Disease Institute of the New York State Department of Health. A codiscoverer of the etiologic agent of Lyme disease, Dr. Benach has centered his research interests on the pathogenesis of spirochetal and other tickborne infections. He has served on PHS advisory committees, including two NIH study sections, and on the editorial boards of several journals.

Robert B. Couch, M.D., is professor and chairman, Department of Microbiology and Immunology, and professor of medicine, Baylor College of Medicine. He has served on many advisory committees, including an NIH study section, NIAID Board of Scientific Counselors, National Vaccine Advisory Committee, and FDA Vaccines and Related Biological Products Advisory Committee. Dr. Couch was an associate editor of research journals and a microbiology textbook. His research has focused on acute respiratory diseases, particularly influenza and rhinoviruses, and vaccine development.

Martin E. Delaney is the executive director of Project Inform, a nonprofit organization that supplies AIDS treatment information to more than 30,000 people nationwide. He is author of many AIDS-related works and has represented the AIDS community in many constituency and governmental AIDS organizations, including the Presidential AIDS Commission and congressional committees. Mr. Delaney serves on local and national advisory boards and advisory groups, including the IOM Roundtable on the Development of Drugs and Vaccines for AIDS.

Lawrence Deyton, M.S.P.H., M.D., is director of HIV/AIDS services and research for the Department of Veterans Affairs. His interests are HIV clinical research and treatment strategies. Dr. Deyton served in several positions in NIAID between 1987 and 1998: acting director of the Division of Extramural Activities, chief of the HIV Research and the Community Clinical Research Branches in DAIDS, and fellow in infectious diseases in NIAID's Laboratory of Immunoregulation.

Jerrold J. Ellner, M.D., is professor and executive vice-chair, Department of Medicine, Case Western Reserve University and University Hospitals, Cleveland. He is also cochair, Tuberculosis and Leprosy Panel, U.S.-Japan Cooperative Medical Sciences Program; member of the Immunology of Mycobacterial Diseases Steering Committee, WHO; and director, Tuberculosis Research Unit, Case Western Reserve University. Dr. Ellner has served on many advisory committees, including the Advisory Council for Elimination of Tuberculosis, and was a member and chair of the Bacteriology and Mycology-1 Study Section.

Lt. Col. Theodore M. Freeman, M.D., is chairman, Department of Allergy/Immunology, Wilford Hall Medical Center, Lackland Air Force Base, San Antonio, Texas. A member of the U.S. Air Force, he is program director for the Allergy/Immunology Fellowship Program and Clinical Laboratory Immunology Fellowship Program and medical codirector of the Clinical Immunology Laboratory, which includes the transplantation lab section at Wilford Hall Medical Center. His research has focused primarily on environmentally related allergy topics, specifically medical aspects of the imported fire ant.

Janis V. Giorgi, Ph.D., is professor of medicine, UCLA School of Medicine, and director, UCLA Research Core Flow Cytometry Facility, Jonsson Comprehensive Cancer Center, and the Center for AIDS Research. Dr. Giorgi studies AIDS immunology and has published on immunophenotypic and functional alterations of HIV-1 disease. Her research identifies the mechanisms of host protective immunity against viral infection and pathogenesis. She is active in developing clinical immunology, especially applications of flow cytometry in the diagnosis and prognosis of disease.

Laurie H. Glimcher, M.D., holds the Irene Heinz Given professorship of immunology, Harvard School of Public Health, and is an associate rheumatologist and immunologist at the Brigham and Women's Hospital, Boston. In her research, she studies the structure, function, and regulation of the major histocompatibility complex and gene expression in T helper cell differentiation.

Dr. Glimcher received the Lee S. Howley Award from the American College of Rheumatology and was recently appointed to the Howard Hughes Medical Institute Scientific Advisory Board.

James M. Hughes, M.D., is the director of the National Center for Infectious Diseases of the Centers for Disease Control and Prevention. Dr. Hughes has published on many infectious disease topics, including the epidemiology and pathogenesis of enteric diseases and the epidemiology, surveillance, and control of nosocomial and emerging infections.

Louise M. Jacobbi is director, Louisiana Organ Procurement Agency. She was an instructor in surgery at Louisiana State University School of Medicine, Shreveport, and clinical research associate, Tulane University. Ms. Jacobbi was president, North American Transplant Coordinators Organization and was the first governor for the American Board of Transplant Coordinators. She has served on the Board of Directors, United Network for Organ Sharing. For 36 years, she has worked and published in the field of transplantation; areas of interest are organ recovery, histocompatibility, and the impact of registries on organ donation.

Warren D. Johnson, Jr., M.D., is the B.H. Kean Professor of Tropical Medicine and chief, Division of International Medicine and Infectious Diseases, Cornell University Medical College. He is also chair of the Subspecialty Board on Infectious Diseases of the American Board of Internal Medicine. Dr. Johnson's research interests include the epidemiology, pathogenesis, and therapy of parasitic diseases, HIV infection, and tuberculosis.

Thomas J. Lawley, M.D., is dean and William P. Timmie Professor of Dermatology, Emory University School of Medicine, as well as vice president of Emory Healthcare and president of Emory Medical Care Foundation. Dr. Lawley is the former chair of dermatology at Emory. His areas of research interest include autoimmune skin diseases, the cell biology of endothelial cells, and regulation of cell adhesion molecules. Dr. Lawley has served on many boards and committees, including an NIH study section.

Stephan E. Lawton, J.D., is a lawyer in a private practice, representing medical specialty organizations and public health associations. These organizations include the American Academy of Pediatrics, the Infectious Diseases Society of America, and the Endocrine Society. Mr. Lawton has also worked on Capitol Hill developing legislation in health-related areas and was recently chairman of the PHS Advisory Commission on Childhood Vaccines.

Garry T. Lyle is controller, Eastern Operations, Customer Administrative Center, the Xerox Corporation, St. Petersburg, Florida. Mr. Lyle is a former athlete with the Chicago Bears (1967 to 1974). In his 20 years of experience working in business operations, Mr. Lyle's management focus has included logistics and distribution, profit and loss, audit readiness control, and customer service. He is an active member of Family Resources, Inc., serving on its board and on several other committees.

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Samuel C. Silverstein, M.D., is the John C. Dalton professor and chairman, Department of Physiology and Cellular Biophysics, and professor, Department of Medicine, Columbia University, New York. He is an internationally recognized leader in phagocyte and host defense research. His studies explore the regulation of phagocyte chemotaxis, receptor trafficking, and phagocyte interactions with intracellular matrix proteins and endothelial cells. Dr. Silverstein is a director of the Damon Runyon Walter Winchell Foundation, Research! America, and the Keystone Symposia and member of the Institute of Medicine.

Emily J. Spitzer, J.D., is vice president of research for the Juvenile Diabetes Foundation International. In addition to serving on its International Board of Directors, she has participated in the organization's grant review process for the past seven years and has also served on its Government Relations Committee helping to formulate strategies to encourage more biomedical research not only in the public sector but also in partnerships between public and private organizations.

W. Gary Tarpley, Ph.D., is vice-president, discovery research, Pharmacia & Upjohn, Inc., Kalamazoo. Dr. Tarpley's research interests include the expression of essential HIV genes and analyses of the structure and function of critical HIV proteins, molecular retrovirology, the molecular mechanisms of viral drug resistance, the molecular mechanisms involved in the transformation of animal cells, the structure and function of oncogenes, and molecular targets for the discovery of cancer drugs.

Emil R. Unanue, M.D., is professor of pathology and head, Department of Pathology and the Center for Immunology, Washington University School of Medicine. He has served on NIH advisory committees, most recently, the NIAID Board of Scientific Counselors. Dr. Unanue's long-standing interest is the biology and molecular understanding of antigen processing and presentation. His work examines the biochemical basis of peptide presentation by class II histocompatibility molecules, including autologous peptides involved in autoimmune diabetes, and innate immune responses to intracellular pathogenic bacteria.

Mildred F. Williamson, M.S.W., is serving her ninth year as administrator, Women and Children HIV Program at Cook County Hospital, Chicago. She is also program director, Cook County HIV Primary Care Center. Ms. Williamson has been a recipient and manager of grants from the Chicago Department of Public Health, the Robert R. McCormack Charitable Foundation, HRSA's Maternal and Child Health Bureau, and the Pediatric AIDS Foundation. She has an accomplished record of service with organizations providing social services and patient advocacy.

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